PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

18817640

			SMALL ENTITY			OTUED THAN						
TOTAL CLAIMS			(Column 1)		(Column 2)			TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			1.	1.		·		RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FE	F 770.00
TOTAL CHARGEABLE CLAIMS			/ minus 20=		* 4			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ n	ninus 3 =	*	*		X43=		1	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	
MULTIPLE DEPENDENT CLAIM PI			PRESENT					- 45	 	OR	ļ	
*1	f the differenc	e in column 1 is	less than z	ero, enter	"0" in	column 2	'	+145=	 	OR	<u> </u>	79
CLAIMS AS AMENDED - PART II								TOTAL		OR		++0-
		(Column 1)		(Colum	nn 2)	(Column 3)		SMALL	ENTITY	OR	OTHEF SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE:	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		· X\$ 9=	'	OR	X\$18=	FEE
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.145-		1 1		
							L	+145=		OR	+290= TOTAL	
(Column 1) (Column 2) (Column 3)								DDIT. FEE		OR ,	ADDIT. FEE	
		CLAIMS		HIGHE		(Column 3)				, ,		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	USLY -	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	r	X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		F	+145=				
							L	+ 145= TOTAL		OR	+290= TOTAL	
(0-1)							AD	DIT. FEE		OR A	DDIT. FEE	
1	`	(Column 1) CLAIMS		(Column HIGHES		(Column 3)		•				·
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total	*	Minus	##		=		X\$ 9=		<u>.</u> ,	X\$18=	FEE
AM	Independent		Minus	***		=	\vdash	X43=		OR		
	FIRȘT PRESEI	ENDENT C	LAIM					OR L	X86=			
• If	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
!t	the "Highest Nurr the "Highest Nurr	nber Previously Pain nber Previously Pain per Previously Paid	d For IN THIS d For IN THIS	SPACE is le	es than	20, enter *20.*		TOTAL DIT. FEE			TOTAL DDIT. FEE	